



RESEARCH ARTICLE

CURRENT STATUS OF PUBLIC HEALTH NURSING IN TURKEY, PROBLEMS ENCOUNTERED AND SOLUTION PROPOSALS

¹Tuğba GÜLTEKİN and ²Melek ARDAHAN

¹Dokuz Eylül University, Health Services Vocational School, Primary and Emergency Care Program, Instructor, İzmir

²Ege University, Nursing Faculty, Public Health Nursing Department, Asst. Prof., İzmir

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ABSTRACT

The aim of the study is to analyze the work environment and problems of public health nurses working within the primary health care system in Turkey, and propose solutions from a societal and nursing point of view. In the world, the need for quality work force in primary health care has increased due to the expansion of health care coverage today. Despite the fact that there are graduate and doctoral programs in Public Health Nursing Departments of universities in our country, nurses and nurse midwives working in community health centers and family health centers carry out the duties of public health nurses within Turkey's healthcare system. The number of public health nurses employed in primary healthcare institutions is very low and insufficient. The conditions in these primary work environments affect public health nurses negatively in terms of physical, psychological and social aspects. It is necessary to improve the employee personal rights of public health nurses, reestablish the occupational identity of public health nursing, and improve the conditions for providing holistic health care.

*Corresponding author

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INTRODUCTION

Work is an inevitable necessity for human beings. This is because human beings need to work to produce and obtain everything they need in life. Working is part of life (Esmek and Demircan, 2003). Just as working is a human right, working in a healthy and safe environment is also a human right (Dindar *et al.*, 2004). Studies in recent years have shown that healthcare work environments have a variety of risks for healthcare workers, particularly nurses, and the importance of this issue is addressed (Stone *et al.*, 2003; Buchan and Calman, 2004). Similarly, the International Society of Nurses (ICN) has focused its 2006 theme on "Safe Environment-Safe Employment" and its 2007 theme on "Positive Application-Work Environment".

Work Environment of Public Health Nurses in Turkey

In the world, the need for qualified work force in primary care has increased due to the expansion of health care coverage today. Rapid changes in healthcare institutions, understanding of quality, technological developments, budget constraints, lack of education, lack of staff, management problems, and

complicated health care services create an environment that fosters negative feelings and thoughts in healthcare personnel (Martel *et al.*, 2006; Rose *et al.*, 2006). When we look at the distribution of healthcare personnel according to service units; it is seen that the number of nurses working in hospitals is 84,570 (83%), the number of nurses working in family health centers is 6,876 (7%), and the number of nurses working in other institutions is 10,276 (10%) (Healthcare Statistics Yearbook 2015). The total number of nurses in Turkey is 152.952. According to NUTS (Nomenclature of territorial units for statistics) classification, the number of nurses and midwives in Turkey per 100,000 people is 257 in 2016. The number of nurses and midwives per 100,000 people is 2105 in Norway, and 1858 in Denmark (Healthcare Statistics Yearbook 2016). These data indicate that the number of public health nurses working in Turkey in general and especially in the primary level is very low and inadequate.

Problems of Public Health Nurses

The following sub-branches of public health nursing and the duties, authorities and responsibilities have been added to Article 7 of the Regulation on the Amendment of Nursing Regulation No. 27910 issued on 19 April 2011 in our country.

However, these specialization areas are not taken into account when nurses are employed in these fields.

Sub-branches of Public Health Nursing include

- Home Care Nursing,
- Maternal and Infant Health and Family Planning Nursing,
- Community Mental Health Center Nursing,
- Occupational Health Nursing,
- School Health Nursing,
- Criminal and Detention Center Nursing (Nursing Regulation, 2011).

Protection and improvement of the physical, mental and social health of the individual, the family and the community can be achieved through home care nursing, which is an important service of public health nursing. Home care services, which is applied in many countries of the world and is becoming increasingly widespread, is one of the most appropriate methods of preserving health and improving quality of life. Home care nursing services are provided by local nurses in the UK and Australia, and by home care nurses in the United States (Brookes *et al.*, 2004; Poulton 2009; Canales and Drevdahl, 2014). In Turkey, the concept of home care nursing has yet to attain the necessary importance and support. There is a need to review and revise legal regulations on health and social needs, and to increase the number of physician-independent professional roles. In the modern world, people have the right to decide, plan and implement their decisions on the number and time of children they will have. Maternal and infant health and family planning are important services that contribute to public health. Maternal and Infant Health and Family Planning Nurses, an important member of the health team, have important professional roles and responsibilities in family planning services. Nursing roles can be grouped under four headings: care, education, management, and research (Ward and Hisley, 2016). Qualified maternal and infant health and family planning nurses are needed to carry out these tasks, which are important for raising healthy children and increasing the number of responsible and conscious families.

Just as in other sub-branches of public health nursing, the same conditions apply to community mental health nurses in Turkey. According to Turkey Mental Health Profile Study, it was found that 18% of the population had a mental illness at some point in their lives, and the rate of problem behavior at a clinical level in children and adolescents was 11% (National Mental Health Action Plan, 2011). Nurses working in this field should be certified in the field of community mental health nursing or have a master's degree. In developed countries, occupational health nursing has undergone a major change by being influenced by scientific, technological and social developments, and the role and place of nurses in protecting and improving worker health has been acknowledged. In Turkey, persons with nursing, health officer, emergency medical technician and environmental health technician diplomas can obtain the workplace nursing certificate stated in Law No. 6331 on Occupational Health and Safety (Occupational Health and Safety Law 2012). Providing a workplace nursing certificate to high school graduates and people with different specializations is a major problem and reduces the quality of service. As it is understood from the name, workplace nursing certificates should be given to nurses specialized in the field of occupational health nursing.

Today, in line with their occupational roles, school nurses have various tasks such as determining the health needs of the school community, forming a healthy school environment, and preventing diseases and injuries. In the 21st century, the importance of individual and family focused care in school health services has been emphasized (Wolfe and Selekman, 2002; Croghan and Johnson, 2004; Kabasakal and Emiroglu, 2017). It is seen that organization and implementation of school health services carried out in limited time periods by nurses working in community health centers in Turkey falls wide of the mark from modern school health service practices and precedents. When we look at forensic nursing practices, while a number of specializations have been defined in developed countries such as coroners, sexual assault investigation nurses, legal advisor nurse and lawyer nurse, forensic psychiatric nurses, clinical nursing specialists, and rehabilitation/detention center nurses; the number of expert forensic nurses working in this field in Turkey is highly insufficient (Amar and Sekula, 2015). It is known that nurses working in this field cannot identify and perform the necessary approaches because of a lack of information and knowledge in forensic medicine when they encounter judicial or forensic incidents. It is important for nurses to be able to recognize forensic cases and to have adequate knowledge, understanding and skills to identify, collect, store and record evidence (Cowley, Walsh and Horrocks, 2014; Amar and Sekula, 2015). Since this is an important public health nursing field that has been particularly neglected in Turkey, there is a need to train specialized and qualified nurses.

Conclusion and Proposals

Although graduate and doctoral programs on public health nursing are carried out in Turkey since 1982 and 1987, respectively, the roles and duties of public health nurses are being fulfilled within the implemented healthcare system by nurses and midwives working in community health centers and family health centers. The conditions of the working environment negatively affect public health nurses working at primary care institutions in terms of physical, psychological and social aspects. Psychological conditions such as stress and anxiety, musculoskeletal system disorders, and various blood-borne diseases occur due to working conditions. Nurses working in environments that create a desire to leave the institution reduces quality of service, causes the performance of nurses to fall, and often estranges them from the profession. Many studies evaluating work environments have also determined that the personnel who work in a healthy and good work environment provide better quality and qualified care services, and the satisfaction of both service provider and service recipient increase. Today, working in a healthy and safe working environment is a right that every employee should have, and new regulations are needed in Turkey to address these issues. In addition, it is necessary to improve the employee personal rights of public health nurses, reestablish the occupational identity of public health nursing, and improve the conditions for providing holistic health care.

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